

## PERMISSION OF SIGNATURE

The following information must be completed in full for acceptance. Any incomplete forms will not be accepted.

### Permission of Signature

I certify that I am the parent or guardian of the below-named student now attending Church After School Association, Inc. After-School programming. Church After School Association, Inc. has my full permission to sign the child(ren) named below in and out of the Church After School Association, Inc. facility on my behalf to help eliminate the spread of germs due to COVID-19.

Parent/Guardian Name (print): \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Child's Full Name: \_\_\_\_\_

Sibling's Full Name: \_\_\_\_\_

Sibling's Full Name: \_\_\_\_\_

Date: \_\_\_\_\_

## PERMISSION OF PLAY

The following information must be completed in full for acceptance. Any incomplete forms will not be accepted.

### Permission of Play

I certify that I am the parent or guardian of the below-named student now attending Church After School Association, Inc. After-School programming. Church After School Association, Inc. has my full permission in allowing for my child(ren) to play outside of a fenced in area during activities/play.

Parent/Guardian Name (print): \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Child's Full Name: \_\_\_\_\_

Sibling's Full Name: \_\_\_\_\_

Sibling's Full Name: \_\_\_\_\_

Date: \_\_\_\_\_